

(Report due **no later than 15th of month** following shipment)

**REPORT OF BEER SALES
FROM BREWERIES TO WYOMING WHOLESALERS**

Mail this form along with invoices
to: State of Wyoming
WYOMING LIQUOR DIVISION
Cheyenne, Wyoming 82002-0110

Brewery:										Page	of
						For the Month of:				20	
Address (P.O. Box, Street, City, State, Zip):										Phone Number:	
Date	Sold to:	Invoice Number	1/2 Keg	1/4 Keg	24/12 oz.	/ oz.	/ oz.	/ oz.	/ oz.	Gallons (Nearest Hundredth)	
I do solemnly swear that the foregoing is a true and correct statement of all beer manufactured or imported into the State during the month for which this report is rendered, to the best of my knowledge and belief.											
Date Signed:	State of:	County of:	Printed Name:				Signature:				